Indians affected by AIDS

3846. MISS SAROJ KHAPARDE: *Will the PRIME MINISTER be pleased to state:*

(a) whether it is a fact that of the 15 lakh people affected by diseases relating to AIDS and tobacco use in South East Asia region, 60 per cent are from India;

(b) if so, the details thereof; and

(c) what action Government have taken/propose to take in the matter?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) and (b) No reliable data on people affected by diseases relating to AIDS and Tobacco in South East Asia region is available.

(c) Facilities for symptomatic treatment of AIDS, and for diseases arising out of consumption of tobacco are available in all major Government hospitals. Health education to the highlight the adverse impact on health due to tobacco use has been taken up in hand. Since there is no cure or vaccine for HIV/AIDS as of now, the major thrust of the AIDS control programme is on creation of awareness about HIV/AIDS and behaviour change. Other areas of intervention consist of measures to ensure blood safety and control of sexually transmitted diseases as HIV/AIDS is basically a sexually transmitted disease.

Development of drugs for treatment of AIDS (AZT) by IICT

3847. SHRI MD. SALIM:
SHRI DIPANKAR MUKHERJEE:

Will the PRIME MINISTER be pleased to state:

(a) whether Indian Institute of Chemical Technology (IICT), Hyderabad had developed drugs for treatment of AIDS (AZT) and abortion bill RU 486.

(b) if so, what the reasons that the above drugs have not been marketed within and outside the country;

(c) whether the processes for manufacture of AZT and the ulcer drug Omeprazole have been released to a private party outside the country; if so, the reasons therefor;

(d) whether IICT incurred a loss of Rupees 20 lakhs for development of Cyanuric Chloride process, though it was sponsored by M/s ATIC Industries, if so, the reasons therefor; and

(d) whether there has been any work done at laboratory scale with regard to the agreement signed by IICT with M/s. Cyanide & Chemicals Co.; if so, the details thereof and the time required to demonstrate the process at pilot plant level?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) IICT has developed process knowhow on laboratory scale for the preparation of Azidothymidine (AZR) for treatment of AIDS and RU-486, an abortifacient.

(b) The process of AZT and RU 486 have been licensed to pharmaceutical firms.

(c) Yes, Sir. The Processes for AZT and Omeprazole (Antu-ulcer drug) have been licensed to a private party in Brazil through National Research and Development Corporation, as a commercial transaction.

(d) It has been reported by Council of Scientific and Industrial Research that IICT initially undertook their development work on continuous pilot plan scale as sponsored project. However the work involved an additional expenditure of Rs. 20 lakhs which was met by IICT. The initial sponsor surrendered his right in the process and as a consequence IICT was able to license the process to another Party on payment of over Rs. 200 lakhs, thereby netting a significant surplus.

(e) IICT has already demonstrated the process for Cyanuric Chloride to M/s. Cyanides & Chemical Co. Bombay on pilot plant scale. IICT are now inter acting with the party for preparation of design report for 750 TPA commercial plant of the party.

मातृ दुग्ध बैंक

3848. **श्री चिमनभाई हरिभाई शुक्ला :**
श्री अनन्तराय देवशंकर दुबे :

क्या प्रधान मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या देश में मातृ दुग्ध बैंकों की स्थापना के भारी अवसर है ;

(ख) यदि हां, तो इस समय देश में ऐसे कितने बैंक कार्यरत हैं और तत्संबंधी ब्यौरा क्या है ;

(ग) क्या ऐसे और बैंकों के खोले जाने और उनके संवर्धन संबंधी कोई योजनाएं हैं ; और

(घ) यदि हां, तो तत्संबंधी ब्यौरा क्या है ?

स्वास्थ्य और परिवार कल्याण मंत्रालय में उपमंत्री (श्री पवन सिंह घाटोवार) : (क) जी, नहीं ।

(ख) एक मातृ दुग्ध बैंक 1989 से लोकमान्य तिलक मैमोरियल अस्पताल, बम्बई में चल रहा है ।

(ग) जी, नहीं ।

(घ) प्रश्न नहीं उठता ।

Contamination of life saving drugs

3849. DR. SANJAYA SINH: Will the PRIME MINISTER be pleased to state:

(a) whether it is a fact that the Federation of Parenteral Manufacturers of India (FPMT) has expressed serious concern over the growing incidence of contamination of life saving drugs including Intravenous Fluid, being supplied by several companies to hospitals and drug stores;

(b) whether it is also a fact that the major cause of contamination of drugs is the use of the low grade plastic containers and pouches by the manufacturers for packing the drugs; which has rendered about 400 persons blind as per study conducted by the All India Opthalmology Society; and

(c) what is the reaction of Government in regard thereto and whether Government propose to ban the use of plastic containers made of MDP material for packaging of life saving drugs and if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) Yes, Sir.

(b) No, Sir. However, The All India Opthalmological Society, New Delhi has reported that some Opthalmic surgeons after using Irrisol (an eye preparation) on their patients came across most-operative complications.

(c) Government has no such proposal to ban the use of plastic containers made of MDP materials for packaging of Intravenous fluids.

Female Infanticide

3850. SHRI TINDIVANAM G. VENKATRAMAN: Will the PRIME MINISTER be pleased to state:

(a) what is the total number of dest ruction of female foetuses per year State-wise during the last three years;

(b) what steps Government have taken to prevent infantiside foetus abortions in the country;

(c) the State where maximum number of female foetus abortions are taking place; and

(d) what special steps have been taken to prevent the same?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI PABAN SINGH GHATOWAR): (a) Selective destruction of female foetuses is not permissible under the law.